

| UNITED STATES BANKRUPTCY COURT<br>WESTERN DISTRICT OF MISSOURI   |   | VOLUNTARY PETITION  |
|--|---|---|
| Name of Debtor (if individual, enter Last, First, Middle):<br><b>Zumalt, Christopher T.</b>  |   | Name of Joint Debtor (Spouse) (Last, First, Middle):  |
| All Other Names used by the Debtor in the last 8 years<br>(include married, maiden, and trade names):  |   | All Other Names used by the Joint Debtor in the last 8 years<br>(include married, maiden, and trade names):   |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN<br>(if more than one, state all): <b>2087</b>  |   | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN<br>(if more than one, state all):   |
| Street Address of Debtor (No. and Street, City, and State):<br><b>273 NW 1401 Road<br/>Holden, Missouri</b>  |   | Street Address of Joint Debtor (No. and Street, City, and State):   |
| ZIP CODE <b>64040</b>  |   | ZIP CODE  |
| County of Residence or of the Principal Place of Business:<br><b>JOHNSON</b>   |   | County of Residence or of the Principal Place of Business:  |
| Mailing Address of Debtor (if different from street address):  |   | Mailing Address of Joint Debtor (if different from street address):   |
| ZIP CODE   |   | ZIP CODE  |
| Location of Principal Assets of Business Debtor (if different from street address above):  |   |   |
| ZIP CODE   |   |   |
| <b>Type of Debtor</b><br>(Form of Organization)<br>(Check <b>one</b> box.)<br><br><input checked="" type="checkbox"/> Individual (includes Joint Debtors)<br><i>See Exhibit D on page 2 of this form.</i><br><input type="checkbox"/> Corporation (includes LLC and LLP)<br><input type="checkbox"/> Partnership<br><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  | <b>Nature of Business</b><br>(Check <b>one</b> box.)<br><br><input type="checkbox"/> Health Care Business<br><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)<br><input type="checkbox"/> Railroad<br><input type="checkbox"/> Stockbroker<br><input type="checkbox"/> Commodity Broker<br><input type="checkbox"/> Clearing Bank<br><input type="checkbox"/> Other | <b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check <b>one</b> box.)<br><br><input checked="" type="checkbox"/> Chapter 7<br><input type="checkbox"/> Chapter 9<br><input type="checkbox"/> Chapter 11<br><input type="checkbox"/> Chapter 12<br><input type="checkbox"/> Chapter 13<br><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding<br><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  |
| <b>Chapter 15 Debtors</b><br><br>Country of debtor's center of main interests:<br><br>Each country in which a foreign proceeding by, regarding, or against debtor is pending:  | <b>Tax-Exempt Entity</b><br>(Check box, if applicable.)<br><br><input type="checkbox"/> Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).   | <b>Nature of Debts</b><br>(Check <b>one</b> box.)<br><br><input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."<br><input type="checkbox"/> Debts are primarily business debts.   |
| <b>Filing Fee</b> (Check one box.)<br><br><input checked="" type="checkbox"/> Full Filing Fee attached.<br><br><input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.<br><br><input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. |   | <b>Chapter 11 Debtors</b><br><br><b>Check one box:</b><br><input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).<br><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).<br><br><b>Check if:</b><br><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ).<br>-----<br><b>Check all applicable boxes:</b><br><input type="checkbox"/> A plan is being filed with this petition.<br><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). |
| <b>Statistical/Administrative Information</b><br><br><input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.<br><input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.   |   | THIS SPACE IS FOR COURT USE ONLY  |
| Estimated Number of Creditors<br><input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000  |   |   |
| Estimated Assets<br><input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion                              |   |   |
| Estimated Liabilities<br><input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion                         |   |   |

|   |  |                 |   |  |             |
|---|--|-----------------|---|--|-------------|
| <b>Voluntary Petition</b><br><i>(This page must be completed and filed in every case.)</i>  |  | <b>Document</b> |   | <b>Page 2 of 50</b><br><b>Zumalt, Christopher T.</b> |             |
| <b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)  |  |                 |   |  |             |
| Location Where Filed: <b>NONE</b>   |  |                 | Case Number:  |  | Date Filed: |
| Location Where Filed:   |  |                 | Case Number:  |  | Date Filed: |
| <b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)   |  |                 |   |  |             |
| Name of Debtor: <b>NONE</b>   |  |                 | Case Number:  |  | Date Filed: |
| District:   |  |                 | Relationship:   |  | Judge:      |
| <div style="text-align: center;"><b>Exhibit A</b></div> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>   |  |                 | <div style="text-align: center;"><b>Exhibit B</b></div> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p>X <u>/s/Brett T. Burmeister</u> <u>February 7, 2014</u><br/>         Signature of Attorney for Debtor(s) (Date)</p> <p><b>Bar No.: 58921</b></p> |  |             |
| <div style="text-align: center;"><b>Exhibit C</b></div> <p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No.</p>   |  |                 |   |  |             |
| <div style="text-align: center;"><b>Exhibit D</b></div> <p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input checked="" type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.</p>   |  |                 |   |  |             |
| <div style="text-align: center;"><b>Information Regarding the Debtor - Venue</b></div> <p>(Check any applicable box.)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.</p>  |  |                 |   |  |             |
| <div style="text-align: center;"><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b></div> <p>(Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p style="text-align: right;">_____<br/>(Name of landlord that obtained judgment)</p> <p style="text-align: right;">_____<br/>(Address of landlord)</p> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p> |  |                 |   |  |             |

|   |   |
|---|---|
| <p><b>Voluntary Petition</b><br/>(This page must be completed and filed in every case.)</p>   | <p><b>Document</b><br/>Page 3 of 50<br/><b>Zumalt, Christopher T.</b></p>   |
| <p><b>Signatures</b></p>  |   |
| <p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.<br/>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.<br/>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>/s/Christopher T. Zumalt</u><br/>Signature of Debtor <b>Christopher T. Zumalt</b></p> <p>X _____<br/>Signature of Joint Debtor</p> <p>_____<br/>Telephone Number (if not represented by attorney)<br/><b>February 7, 2014</b><br/>Date</p> | <p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only <b>one</b> box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____<br/>(Signature of Foreign Representative)</p> <p>_____<br/>(Printed Name of Foreign Representative)</p> <p>_____<br/>Date</p>  |
| <p style="text-align: center;"><b>Signature of Attorney*</b></p> <p>X <u>/s/Brett T. Burmeister</u><br/>Signature of Attorney for Debtor(s)<br/><b>Brett T. Burmeister</b><br/>Printed Name of Attorney for Debtor(s)<br/><b>Brett Burmeister LLC</b><br/>Firm Name<br/><b>Truman Law Building, 14701 E. 42nd Street</b><br/><b>Independence, Missouri 64055</b><br/>Address<br/><b>(816) 373-5590</b><br/>Telephone Number<br/><b>February 7, 2014</b><br/>Date<br/><b>Bar No.: 58921</b><br/><b>Fax: (816) 373-2112</b><br/><b>E-mail: brett@bgattorney.com</b></p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>   | <p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____<br/>Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____<br/>Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____<br/>Address</p> <p>X _____<br/>Signature</p> <p>_____<br/>Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p> |
| <p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____<br/>Signature of Authorized Individual</p> <p>_____<br/>Printed Name of Authorized Individual</p> <p>_____<br/>Title of Authorized Individual</p> <p>_____<br/>Date</p>   |   |

**United States Bankruptcy Court**  
**WESTERN DISTRICT OF MISSOURI**

**In re**

**Christopher T. Zumalt**

Case No. \_\_\_\_\_

**Debtor**

Chapter **7** \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ **3,000.00**

Prior to the filing of this statement I have received ..... \$ **3,000.00**

Balance Due ..... \$ **0.00**

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)**

d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~-----

e. [Other provisions as needed]

**None**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Adversary Complaint**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

**February 7, 2014**

*Date*

**/s/BrettT.Burmeister**

**Brett T. Burmeister**

*Signature of Attorney*

**Brett Burmeister LLC**

*Name of law firm*

Agco Finance  
PO Box 2000  
Johnston, IA 50131-0020

Argo Finance LLC  
8001 Birchwood Court  
Johnston, IA 50131

ARS National Services, Inc.  
201 W. Grand Avenue  
Escondido, CA 92025-4147

Bank of America  
PO Box 982235  
El Paso, TX 79998-2235

Best Buy Credit Services  
PO Box 790441  
St. Louis, MO 63179

Capital One Retail Services  
PO Box 5893  
Carol Stream, IL 60197

Chase  
PO Box 15298  
Wilmington, DE 19850-5298

Citibank  
PO Box 790034  
St. Louis, MO 63179-0034

Client Services, Inc.  
3451 Harry Truman Blvd.  
St. Charles, MO 63301-4047

CNH Capital  
PO Box 3600  
Lancaster, PA 17604-3600

Credit First  
PO Box 81410  
Cleveland, OH 44181-0410

Discover  
PO Box 3025  
New Albany, OH 43054-3025

First Central Bank  
PO Box 37  
Holden, MO 64040

GE Capital Retail Bank/Care Credit  
Attn: Bankruptcy Dept.  
PO Box 103104  
Roswell, GA 30076

GE Capital Retail Bank/Lowe's  
Attn: Bankruptcy Dept.  
PO Box 103104  
Roswell, GA 30076

Green Tree Servicing LLC  
PO Box 6172  
Rapid City, SD 57709

Harley Davidson Credit  
PO Box 21829  
Carson City, NV 89721

Matthew Turner, DDS  
629 NW Mock Ave., Suite C  
Blue Springs, MO 64014

Metcalf Bank  
609 N. 291 Highway  
Lee's Summit, MO 64086

North American Savings Bank  
12520 S. 71 Highway  
Grandview, MO 64030

South & Associates, PC  
6363 College Blvd., #100  
Overland Park, KS 66211

The Holden Image  
117 E. Second  
PO Box 8  
Holden, MO 64040

Wells Fargo Dealer Services  
Attn: Correspond-MAC T9017-026  
PO Box 168048  
Irving, TX 75016-8048

Wells Fargo Financial Nat'l. Bank  
800 Walnut Street  
Des Moines, IA 50309

IN THE UNITED STATES BANKRUPTCY COURT FOR THE  
WESTERN DISTRICT OF MISSOURI

IN RE: )  
 ) Case No.  
**Christopher T. Zumalt** )  
 )  
Debtor(s) )

**VERIFICATION BY DEBTOR(S)**

I/We, **Christopher T. Zumalt**, named as the debtor(s) in this case,  
declare under the penalty of perjury that I/we have read the

- ☐ Schedule(s) \_\_\_\_\_ (A - J insert all that apply)
- ☐ Amended Schedule(s) \_\_\_\_\_ (A - J insert all that apply)
- ☐ Conversion Schedules \_\_\_\_\_ (A - J insert all that apply)
- ☐ Statement/Amended Statement of Financial Affairs
- ☐ Statement/Amended Statement of Intent
- ☐ Statement/Amended Statement of Current Monthly Income
- ☒ Matrix
- ☐ Amended Matrix
- ☐ Other \_\_\_\_\_ (describe)

and that they are true and correct to the best of my/our knowledge, information, and belief.

Date: **February 7, 2014**

**/s/Christopher T. Zumalt**  
Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

Instructions: File with original schedules or matrix not filed with the original petition or amended schedules/statements/matrix. Must be prepared as a separate document and must contain image of the debtor(s)' signature(s). Docket as a separate event or as a separate attachment to the schedules/statements/matrix.

ECF Event: If not filed as an attachment to the schedules/statements/matrix, but filed as a separate document use the event – Bankruptcy>Other>Verification by Debtor

# UNITED STATES BANKRUPTCY COURT

## WESTERN DISTRICT OF MISSOURI

In re

**Christopher T. Zumalt**,  
Debtor

Case No. \_\_\_\_\_

Chapter **7** \_\_\_\_\_

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF SHEETS | ASSETS               | LIABILITIES          | OTHER              |
|---|----------------------|---------------|----------------------|----------------------|--------------------|
| A - Real Property   |                      |               | \$ <b>482,500.00</b> |                      |                    |
| B - Personal Property   |                      |               | \$ <b>142,626.00</b> |                      |                    |
| C - Property Claimed<br>as Exempt   |                      |               |                      |                      |                    |
| D - Creditors Holding<br>Secured Claims   |                      |               |                      | \$ <b>640,434.25</b> |                    |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) |                      |               |                      | \$ <b>0.00</b>       |                    |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 |                      |               |                      | \$ <b>177,931.26</b> |                    |
| G - Executory Contracts and<br>Unexpired Leases                                       |                      |               |                      |                      |                    |
| H - Codebtors   |                      |               |                      |                      |                    |
| I - Current Income of<br>Individual Debtor(s)   |                      |               |                      |                      | \$ <b>2,059.61</b> |
| J - Current Expenditures of Individual<br>Debtors(s)                                  |                      |               |                      |                      | \$ <b>3,975.00</b> |
| <b>TOTAL</b>  |                      | <b>0</b>      | \$ <b>625,126.00</b> | \$ <b>818,365.51</b> |                    |

In re Christopher T. Zumalt,

Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

| DESCRIPTION AND<br>LOCATION OF<br>PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | Husband, Wife, Joint,<br>or Community | CURRENT VALUE<br>OF DEBTOR'S<br>INTEREST IN<br>PROPERTY, WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION | AMOUNT OF<br>SECURED<br>CLAIM |
|--|--|---------------------------------------|--|-------------------------------|
| Primary Residence - Single Family Home     | Fee Simple Ownership                       |                                       | \$245,000.00   | \$235,000.00                  |
| Rental Property - Home                     | Fee Simple Ownership                       |                                       | \$237,500.00   | \$259,100.00                  |
| Total ►                                    |  |                                       | \$482,500.00   |                               |

(Report also on Summary of Schedules.)

In re Christopher T. Zumalt,

Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY          | Husband, Wife,<br>Joint, Or Community | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY, WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|---|------------------|--|---------------------------------------|---|
| 1. Cash on hand.  | X                |  |                                       |   |
| 2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. |                  | Checking Accounts at North American Savings Bank |                                       | \$297.00  |
|   |                  | 1/2 interest in Checking Account at Central Bank |                                       | \$29.00   |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.   | X                |  |                                       |   |
| 4. Household goods and furnishings, including audio, video, and computer equipment.   |                  | Furntiure and Household Goods                    |                                       | \$1,250.00  |
|   |                  | Refrigerator                                     |                                       | \$750.00  |
| 5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.   | X                |  |                                       |   |
| 6. Wearing apparel.   |                  | Miscellaneous Clothing                           |                                       | \$250.00  |
| 7. Furs and jewelry.  |                  | Watch  |                                       | \$50.00   |

In re Christopher T. Zumalt,Debtor

Case No. \_\_\_\_\_

(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|   |   |  |  |  |
|---|---|--|--|--|
| 8. Firearms and sports, photographic, and other hobby equipment.  | X |  |  |  |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  | X |  |  |  |
| 10. Annuities. Itemize and name each issuer.  | X |  |  |  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X |  |  |  |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X |  |  |  |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.   | X |  |  |  |
| 14. Interests in partnerships or joint ventures. Itemize.   | X |  |  |  |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X |  |  |  |
| 16. Accounts receivable.  | X |  |  |  |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X |  |  |  |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X |  |  |  |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A – Real Property.  | X |  |  |  |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X |  |  |  |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X |  |  |  |
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | X |  |  |  |

B 6B (Official Form 6B) (12/2007)

In re Christopher T. Zumalt,Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|   |   |  |  |             |
|---|---|--|--|-------------|
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | X |  |  |             |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X |  |  |             |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.  |   | 2003 Dodge Ram 3500 Pickup   |  | \$3,000.00  |
|   |   | 2013 Harley Davidson Road Glide  |  | \$17,000.00 |
| 26. Boats, motors, and accessories.   | X |  |  |             |
| 27. Aircraft and accessories.   | X |  |  |             |
| 28. Office equipment, furnishings, and supplies..   |   | Desk and Computer Equipment  |  | \$500.00    |
| 29. Machinery, fixtures, equipment, and supplies used in business.  | X |  |  |             |
| 30. Inventory.  | X |  |  |             |
| 31. Animals.  | X |  |  |             |
| 32. Crops - growing or harvested. Give particulars.   | X |  |  |             |
| 33. Farming equipment and implements.   |   | New Holland Round Bailer, New Holland Square Bailer, Pequea Tedder, Hay Trailer, New Holland Mower Conditioner |  | \$60,500.00 |
|   |   | Round Bailer, Mower Conditioner, Rake, Brush Hog, Prowler, Disc Mower  |  | \$59,000.00 |
| 34. Farm supplies, chemicals, and feed.   | X |  |  |             |
| 35. Other personal property of any kind not already listed. Itemize.  | X |  |  |             |

2 continuation sheets attached

Total ►

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

\$142,626.00

B6C (Official Form 6C) (04/13)

In re Christopher T. Zumalt,

Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b)(2)☐ 11 U.S.C. § 522(b)(3)☐ Check if debtor claims a homestead exemption that exceeds \$155,675.\*

| DESCRIPTION OF PROPERTY                          | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|--|--------------------------------------|----------------------------|---|
| Checking Accounts at North American Savings Bank | RSMo § 513.430.1(3)                  | \$297.00                   | \$297.00  |
| Furniture and Household Goods                    | RSMo § 513.430.1(1)                  | \$1,250.00                 | \$1,250.00  |
| Miscellaneous Clothing                           | RSMo § 513.430.1(1)                  | \$250.00                   | \$250.00  |
| Watch  | RSMo § 513.430.1(2)                  | \$50.00                    | \$50.00   |
| 2003 Dodge Ram 3500 Pickup                       | RSMo § 513.430.1(5)                  | \$700.00                   | \$3,000.00  |
| Desk and Computer Equipment                      | RSMo § 513.430(4)                    | \$500.00                   | \$500.00  |
| 1/2 interest in Checking Account at Central Bank | RSMo § 513.430.1(3)                  | \$29.00                    | \$29.00   |

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **Christopher T. Zumalt**

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.



Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER<br>(See Instructions Above.)   | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN  | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|----------|------------------------------------|---|------------|--------------|----------|---|---------------------------|
| ACCOUNT NO.<br><b>Agco Finance</b><br><b>PO Box 2000</b><br><b>Johnston, IA 50131-0020</b>  |          |                                    | <b>2001-2012</b><br>Purchase-Money Security Interest<br><br>Round Bailer, Mower Conditioner, Rake, Brush Hog, Prowler, Disc Mower<br><br>VALUE \$ <b>\$59,000.00</b>  |            | <b>X</b>     |          | <b>\$46,523.00</b>                                    | <b>\$6,523.00</b>         |
| <b>Notes: Account Nos: 8364; 0226; 1270</b>   |          |                                    |   |            |              |          |   |                           |
| ACCOUNT NO.<br><b>CNH Capital</b><br><b>PO Box 3600</b><br><b>Lancaster, PA 17604-3600</b>  |          |                                    | <b>2011-2013</b><br>Purchase-Money Security Interest<br><br>New Holland Round Bailer, New Holland Square Bailer, Pequea Tedder, Hay Trailer, New Holland Mower Conditioner<br><br>VALUE \$ <b>\$60,500.00</b> |            | <b>X</b>     |          | <b>\$73,585.00</b>                                    | <b>\$1,585.00</b>         |
| <b>Notes: Account Nos: 1003; 1006; 1008; 1004</b>   |          |                                    |   |            |              |          |   |                           |
| ACCOUNT NO. 1486<br><b>First Central Bank</b><br><b>PO Box 37</b><br><b>Holden, MO 64040</b>  |          |                                    | <b>3/31/2000</b><br>Secondary Mortgage<br><br>Residence locate at 273 NW 1401 Road, Holden, MO<br><br>VALUE \$ <b>\$245,000.00</b>  |            | <b>X</b>     |          | <b>\$65,169.00</b>                                    | <b>\$0.00</b>             |
| <div style="display: flex; justify-content: space-between;"> <div> <b>2</b> continuation sheets attached </div> <div> Subtotal ►<br/>(Total of this page)<br/><br/>Total ►<br/>(Use only on last page) </div> <div> <div style="display: flex; justify-content: space-between;"> <div> <b>\$ 185,277.00</b><br/><br/><b>\$</b> </div> <div> <b>\$ 8,108.00</b><br/><br/><b>\$</b> </div> </div> </div> </div> |          |                                    |   |            |              |          |   |                           |

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re **Christopher T. Zumalt**

Case No. \_\_\_\_\_

Debtor

(if known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER<br>(See Instructions Above.)   | CODEBTR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN   | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|---------|------------------------------------|--|------------|--------------|----------|---|---------------------------|
| <b>ACCOUNT NO. 1509</b><br><b>GE Capital Retail Bank/Lowe's</b><br><b>Attn: Bankruptcy Dept.</b><br><b>PO Box 103104</b><br><b>Roswell, GA 30076</b>                          |         |                                    | <b>3/13</b><br><b>Purchase-Money Security Interest</b><br><br><b>Refrigerator</b><br><br><b>VALUE \$ \$750.00</b>                                  |            | <b>X</b>     |          | <b>\$1,872.87</b>                                     | <b>\$1,122.87</b>         |
| <b>ACCOUNT NO. 2541</b><br><b>Green Tree Servicing LLC</b><br><b>PO Box 6172</b><br><b>Rapid City, SD 57709</b>   |         |                                    | <b>9/24/07</b><br><b>First Mortgage</b><br><br><b>Property located at 608 NW Cliffside Court, Lee's Summit, MO</b><br><b>VALUE \$ \$237,500.00</b> |            | <b>X</b>     |          | <b>\$261,419.53</b>                                   | <b>\$23,919.53</b>        |
| <b>Additional Contacts for Green Tree Servicing LLC (2541):</b><br><br><b>South &amp; Associates, PC</b><br><b>6363 College Blvd., #100</b><br><b>Overland Park, KS 66211</b> |         |                                    |  |            |              |          |   |                           |
| <b>ACCOUNT NO. 7178</b><br><b>Harley Davidson Credit</b><br><b>PO Box 21829</b><br><b>Carson City, NV 89721</b>   |         |                                    | <b>2/5/13</b><br><b>Purchase-Money Security Interest</b><br><br><b>2013 Harley Davidson Road Glide</b><br><br><b>VALUE \$ \$17,000.00</b>          |            | <b>X</b>     |          | <b>\$20,000.00</b>                                    | <b>\$3,000.00</b>         |
| <b>ACCOUNT NO. 5585</b><br><b>North American Savings Bank</b><br><b>12520 S. 71 Highway</b><br><b>Grandview, MO 64030</b>   |         |                                    | <b>3/31/2000</b><br><b>First Mortgage</b><br><br><b>Residence locate at 273 NW 1401 Road, Holden, MO</b><br><b>VALUE \$ \$245,000.00</b>           |            | <b>X</b>     |          | <b>\$169,564.85</b>                                   | <b>\$0.00</b>             |

Sheet no. **1** of **2** continuation sheets attached to Schedule of Creditors Holding Secured ClaimsSubtotal (s) ►  
(Total(s) of this page)\$ **452,857.25** \$ **28,042.40**Total(s) ►  
(Use only on last page)

\$ \$

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re **Christopher T. Zumalt**

Case No. \_\_\_\_\_

Debtor

(if known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER<br>(See Instructions Above.)  | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN , AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|------------------------------------|---|------------|--------------|----------|---|---------------------------|
| ACCOUNT NO. 7488   |          |                                    | 10/16/2010<br>Purchase-Money Security Interest  |            | X            |          | \$2,300.00  | \$0.00                    |
| Wells Fargo Dealer Services<br>Attn: Correspond-MAC<br>T9017-026<br>PO Box 168048<br>Irving, TX 75016-8048 |          |                                    | 2003 Dodge Ram<br>3500 Pickup   |            |              |          |   |                           |
| VALUE \$ \$3,000.00  |          |                                    |   |            |              |          |   |                           |
|  |          |                                    |   |            |              |          |   |                           |
|  |          |                                    |   |            |              |          |   |                           |
|  |          |                                    |   |            |              |          |   |                           |
|  |          |                                    |   |            |              |          |   |                           |
|  |          |                                    |   |            |              |          |   |                           |

In re

Christopher T. Zumalt

Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B 6E (Official Form 6E) (04/13) – Cont.

In re

Christopher T. Zumalt

Debtor

Case No. \_\_\_\_\_

(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

0 continuation sheets attached

In re **Christopher T. Zumalt**, Debtor, Case No. \_\_\_\_\_ (if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i> | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM  |
|--|----------|--|--|------------|--------------|----------|---------------------|
| <b>ACCOUNT NO.</b>   |          |  | <b>2012</b>  |            |              |          |                     |
| <b>Argo Finance LLC</b><br><b>8001 Birchwood Court</b><br><b>Johnston, IA 50131</b>                                  |          |  | <b>Line of Credit</b>  |            | <b>X</b>     |          | <b>\$5,099.00</b>   |
| <b>ACCOUNT NO.</b>   |          |  | <b>2012</b>  |            |              |          |                     |
| <b>Bank of America</b><br><b>PO Box 982235</b><br><b>El Paso, TX 79998-2235</b>                                      |          |  | <b>Credit Card Charges</b>   |            |              | <b>X</b> | <b>\$16,655.08</b>  |
| <b>Notes: #4950 - \$10777.52</b><br><b>#7196 - \$5877.56</b>   |          |  |  |            |              |          |                     |
| <b>ACCOUNT NO.</b> 1380  |          |  | <b>2012</b>  |            |              |          |                     |
| <b>Best Buy Credit Services</b><br><b>PO Box 790441</b><br><b>St. Louis, MO 63179</b>                                |          |  | <b>Credit Card Charges</b>   |            | <b>X</b>     |          | <b>\$3,432.83</b>   |
| <b>Subtotal</b>  |          |  |  |            |              |          | <b>\$ 25,186.91</b> |
| <b>Total</b>   |          |  |  |            |              |          | <b>\$</b>           |

4 continuation sheets attached

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re **Christopher T. Zumalt**,  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)   | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM                      |
|---|----------|--|--|------------|--------------|----------|---|
| <b>ACCOUNT NO. 8127</b>   |          |  | <b>2012</b>  |            |              |          |   |
| <b>Capital One Retail Services</b><br><b>PO Box 5893</b><br><b>Carol Stream, IL 60197</b>   |          |  | <b>Credit Card Charges</b>   |            | <b>X</b>     |          | <b>\$3,246.50</b>                       |
| <b>ACCOUNT NO. 7760</b>   |          |  | <b>2012</b>  |            |              |          |   |
| <b>Chase</b><br><b>PO Box 15298</b><br><b>Wilmington, DE 19850-5298</b>   |          |  | <b>Credit Card Charges</b>   |            | <b>X</b>     |          | <b>\$14,835.39</b>                      |
| <b>ACCOUNT NO. 8342</b>   |          |  | <b>2012</b>  |            |              |          |   |
| <b>Citibank</b><br><b>PO Box 790034</b><br><b>St. Louis, MO 63179-0034</b>  |          |  | <b>Credit Card Charges</b>   |            | <b>X</b>     |          | <b>\$2,488.91</b>                       |
| <b>Additional Contacts for Citibank (8342):</b>   |          |  |  |            |              |          |   |
| <b>ARS National Services,</b><br><b>Inc.</b><br><b>201 W. Grand Avenue</b><br><b>Escondido, CA 92025-4147</b>   |          |  |  |            |              |          |   |
| Sheet no. <u>1</u> of <u>4</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims   |          |  |  |            |              |          | <b>Subtotal▶</b><br>\$ <b>20,570.80</b> |
| (Use only on last page of the completed Schedule F.)<br>(Report also on Summary of Schedules and, if applicable on the Statistical<br>Summary of Certain Liabilities and Related Data.) |          |  |  |            |              |          | <b>Total▶</b><br>\$                     |

In re **Christopher T. Zumalt**,  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)   | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM            |
|---|----------|--|--|------------|--------------|----------|-------------------------------|
| <b>ACCOUNT NO. 1507</b>   |          |  | <b>2012</b>  |            |              |          |                               |
| <b>CNH Capital<br/>PO Box 3600<br/>Lancaster, PA 17604-3600</b>   |          |  | <b>Line of Credit</b>  |            | <b>X</b>     |          | <b>\$7,075.39</b>             |
| <b>ACCOUNT NO. 9132</b>   |          |  | <b>2012</b>  |            |              |          |                               |
| <b>Credit First<br/>PO Box 81410<br/>Cleveland, OH 44181-0410</b>   |          |  | <b>Credit Card Charges</b>   |            | <b>X</b>     |          | <b>\$1,175.08</b>             |
| <b>ACCOUNT NO. 7470</b>   |          |  | <b>2012</b>  |            |              |          |                               |
| <b>Discover<br/>PO Box 3025<br/>New Albany, OH 43054-3025</b>   |          |  | <b>Credit Card Charges</b>   |            | <b>X</b>     |          | <b>\$4,634.50</b>             |
| <b>Additional Contacts for Discover (7470):</b>   |          |  |  |            |              |          |                               |
| <b>Client Services, Inc.<br/>3451 Harry Truman Blvd.<br/>St. Charles, MO<br/>63301-4047</b>   |          |  |  |            |              |          |                               |
| Sheet no. <b>2</b> of <b>4</b> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims   |          |  |  |            |              |          | Subtotal▶ \$ <b>12,884.97</b> |
| (Use only on last page of the completed Schedule F.)<br>(Report also on Summary of Schedules and, if applicable on the Statistical<br>Summary of Certain Liabilities and Related Data.) |          |  |  |            |              |          | Total▶ \$                     |

In re Christopher T. Zumalt,  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)   | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM     |
|---|----------|--|--|------------|--------------|----------|------------------------|
| ACCOUNT NO. 0075  |          |  | 2013   |            |              |          |                        |
| GE Capital Retail Bank/Care<br>Credit<br>Attn: Bankruptcy Dept.<br>PO Box 103104<br>Roswell, GA 30076   |          |  | Credit Card Charges  |            | X            |          | \$4,000.00             |
| Additional Contacts for GE Capital Retail Bank/Care Credit<br>(0075):<br><br>Matthew Turner, DDS<br>629 NW Mock Ave., Suite<br>C<br>Blue Springs, MO 64014  |          |  |  |            |              |          |                        |
| ACCOUNT NO. 9917  |          |  | 7-06   |            |              |          |                        |
| Metcalf Bank<br>609 N. 291 Highway<br>Lee's Summit, MO 64086  |          |  | Loan Deficiency  |            | X            |          | \$66,254.58            |
| ACCOUNT NO.   |          |  | 2012   |            |              |          |                        |
| The Holden Image<br>117 E. Second<br>PO Box 8<br>Holden, MO 64040   |          |  | Classified AD  |            | X            |          | \$478.00               |
| Sheet no. <u>3</u> of <u>4</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims   |          |  |  |            |              |          | Subtotal▶ \$ 70,732.58 |
| Total▶<br>(Use only on last page of the completed Schedule F.)<br>(Report also on Summary of Schedules and, if applicable on the Statistical<br>Summary of Certain Liabilities and Related Data.) |          |  |  |            |              |          | \$                     |

In re **Christopher T. Zumalt**,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)   | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION FOR<br>CLAIM.<br>IF CLAIM IS SUBJECT TO<br>SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM               |
|---|----------|--|--|------------|--------------|----------|----------------------------------|
| <b>ACCOUNT NO. 1464</b><br><b>Wells Fargo Dealer Services</b><br><b>Attn: Correspond-MAC</b><br><b>T9017-026</b><br><b>PO Box 168048</b><br><b>Irving, TX 75016-8048</b>                |          |  | <b>9/17/12</b><br><b>Loan Deficiency (2012</b><br><b>Dodge Laramie)</b>                                      |            | <b>X</b>     |          | <b>\$48,000.00</b>               |
| <b>ACCOUNT NO. 9370</b><br><b>Wells Fargo Financial Nat'l.</b><br><b>Bank</b><br><b>800 Walnut Street</b><br><b>Des Moines, IA 50309</b>  |          |  | <b>2012</b><br><b>Credit Card Charges</b>  |            | <b>X</b>     |          | <b>\$556.00</b>                  |
|   |          |  |  |            |              |          |                                  |
|   |          |  |  |            |              |          |                                  |
|   |          |  |  |            |              |          |                                  |
|   |          |  |  |            |              |          |                                  |
| Sheet no. <b>4</b> of <b>4</b> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims   |          |  |  |            |              |          | Subtotal▶<br>\$ <b>48,556.00</b> |
| (Use only on last page of the completed Schedule F.)<br>(Report also on Summary of Schedules and, if applicable on the Statistical<br>Summary of Certain Liabilities and Related Data.) |          |  |  |            |              |          | Total▶<br>\$ <b>177,931.26</b>   |

B 6G (Official Form 6G) (12/07)

In re Christopher T. Zumalt,

Debtor

Case No. \_\_\_\_\_

(if known)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS,<br>INCLUDING ZIP CODE,<br>OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND<br>NATURE OF DEBTOR'S INTEREST. STATE<br>WHETHER LEASE IS FOR NONRESIDENTIAL<br>REAL PROPERTY. STATE CONTRACT<br>NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

| <b>NAME AND ADDRESS OF CODEBTOR</b> | <b>NAME AND ADDRESS OF CREDITOR</b> |
|-------------------------------------|-------------------------------------|
|                                     |                                     |
|                                     |                                     |
|                                     |                                     |
|                                     |                                     |
|                                     |                                     |
|                                     |                                     |
|                                     |                                     |
|                                     |                                     |

**Fill in this information to identify your case:**

Debtor 1 **Christopher T. Zumalt**  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for: **Western District of Missouri**

Case number  
 (If known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form B 6I**

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

- ☒ Employed  
☐ Not employed

- ☐ Employed  
☐ Not employed

**Occupation**

**Loan Officer - Contract Labor**

**Employer's name**

**BNC National Bank**

**Employer's address**

Number Street

Number Street

**Overland Park, KS**

City State ZIP Code

City State ZIP Code

**How long employed there?**

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|   | For Debtor 1         | For Debtor 2 or non-filing spouse |
|---|----------------------|-----------------------------------|
| 2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. <b>\$2,336.95</b> | <b>\$0.00</b>                     |
| 3. <b>Estimate and list monthly overtime pay.</b>   | 3. <b>+\$0.00</b>    | <b>+\$0.00</b>                    |
| 4. <b>Calculate gross income.</b> Add line 2 + line 3.  | 4. <b>\$2,336.95</b> | <b>\$0.00</b>                     |

Debtor 1

**Christopher T. Zumalt**

First Name

Middle Name

Last Name

Case number (if known)

|  | For Debtor 1       | For Debtor 2 or<br>non-filing spouse |   |
|--|--------------------|--------------------------------------|---|
| <b>Copy line 4 here</b> ..... → 4.   | <b>\$ 2,336.95</b> | <b>\$ 0.00</b>                       |   |
| <b>5. List all payroll deductions:</b>   |                    |                                      |   |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ 277.34      | \$ 0.00                              |   |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ 0.00        | \$ 0.00                              |   |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ 0.00        | \$ 0.00                              |   |
| 5d. Required repayments of retirement fund loans   | 5d. \$ 0.00        | \$ 0.00                              |   |
| 5e. Insurance  | 5e. \$ 0.00        | \$ 0.00                              |   |
| 5f. Domestic support obligations   | 5f. \$ 0.00        | \$ 0.00                              |   |
| 5g. Union dues   | 5g. \$ 0.00        | \$ 0.00                              |   |
| 5h. Other deductions. Specify: _____   | 5h. + \$ 0.00      | + \$ 0.00                            |   |
| <b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.   | 6. \$ 277.34       | \$ 0.00                              |   |
| <b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.  | 7. \$ 2,059.61     | \$ 0.00                              |   |
| <b>8. List all other income regularly received:</b>  |                    |                                      |   |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a. \$ 0.00        | \$ 0.00                              |   |
| 8b. Interest and dividends   | 8b. \$ 0.00        | \$ 0.00                              |   |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c. \$ 0.00        | \$ 0.00                              |   |
| 8d. Unemployment compensation  | 8d. \$ 0.00        | \$ 0.00                              |   |
| 8e. Social Security  | 8e. \$ 0.00        | \$ 0.00                              |   |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify: _____   | 8f. \$ _____       | \$ 0.00                              |   |
| 8g. Pension or retirement income   | 8g. \$ 0.00        | \$ 0.00                              |   |
| 8h. Other monthly income. Specify: _____   | 8h. + \$ _____     | + \$ 0.00                            |   |
| <b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.   | 9. \$ 0.00         | \$ 0.00                              |   |
| <b>10. Calculate monthly income.</b> Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$ 2,059.61    | + \$ 0.00                            | = \$ 2,059.61                                     |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b><br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.<br>Specify: _____ |                    |                                      |   |
|  |                    | 11. + \$ 0.00                        |   |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income.<br>Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies  |                    |                                      | 12. \$ 2,059.61<br><b>Combined monthly income</b> |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>   |                    |                                      |   |
| <input type="checkbox"/> No.   |                    |                                      |   |
| <input checked="" type="checkbox"/> Yes. Explain: <b>See Attachment 1</b>  |                    |                                      |   |

## **Addendum**

### **Attachment 1**

**Employment income has decreased. Debtor is hopeful that employment income will increase to meet monthly cost of living**

Fill in this information to identify your case:

Debtor 1 **Christopher T. Zumalt**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for : **Western District of Missouri**

Case number  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:  
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

\$1,518.00

4.

If not included in line 4:

4a. Real estate taxes

4a.

\$0.00

4b. Property, homeowner's, or renter's insurance

4b.

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4c.

\$0.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

Debtor 1

**Christopher T. Zumalt**

First Name

Middle Name

Last Name

Case number (if known)

|  | Your expenses         |
|--|-----------------------|
| 5. <b>Additional mortgage payments for your residence</b> , such as home equity loans  | 5. \$ <u>635.00</u>   |
| 6. <b>Utilities:</b>   |                       |
| 6a. Electricity, heat, natural gas   | 6a. \$ <u>125.00</u>  |
| 6b. Water, sewer, garbage collection   | 6b. \$ <u>30.00</u>   |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c. \$ <u>90.00</u>   |
| 6d. Other. Specify: <u>Cable</u>   | 6d. \$ <u>75.00</u>   |
| 7. <b>Food and housekeeping supplies</b>   | 7. \$ <u>200.00</u>   |
| 8. <b>Childcare and children's education costs</b>   | 8. \$ <u>0.00</u>     |
| 9. <b>Clothing, laundry, and dry cleaning</b>  | 9. \$ <u>50.00</u>    |
| 10. <b>Personal care products and services</b>   | 10. \$ <u>30.00</u>   |
| 11. <b>Medical and dental expenses</b>   | 11. \$ <u>50.00</u>   |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12. \$ <u>200.00</u>  |
| 13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13. \$ <u>0.00</u>    |
| 14. <b>Charitable contributions and religious donations</b>  | 14. \$ <u>0.00</u>    |
| 15. <b>Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |                       |
| 15a. Life insurance  | 15a. \$ <u>0.00</u>   |
| 15b. Health insurance  | 15b. \$ <u>157.00</u> |
| 15c. Vehicle insurance   | 15c. \$ <u>45.00</u>  |
| 15d. Other insurance. Specify: _____   | 15d. \$ <u>0.00</u>   |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: <u>Personal Property</u>   | 16. \$ <u>100.00</u>  |
| 17. <b>Installment or lease payments:</b>  |                       |
| 17a. Car payments for Vehicle 1  | 17a. \$ <u>215.00</u> |
| 17b. Car payments for Vehicle 2  | 17b. \$ <u>430.00</u> |
| 17c. Other. Specify: <u>Lowes (frig)</u>   | 17c. \$ <u>25.00</u>  |
| 17d. Other. Specify: _____   | 17d. \$ _____         |
| 18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).</b> | 18. \$ <u>0.00</u>    |
| 19. <b>Other payments you make to support others who do not live with you.</b><br>Specify: _____   | 19. \$ <u>0.00</u>    |
| 20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |                       |
| 20a. Mortgages on other property   | 20a. \$ <u>0.00</u>   |
| 20b. Real estate taxes   | 20b. \$ <u>0.00</u>   |
| 20c. Property, homeowner's, or renter's insurance  | 20c. \$ <u>0.00</u>   |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. \$ <u>0.00</u>   |
| 20e. Homeowner's association or condominium dues   | 20e. \$ <u>0.00</u>   |

Debtor 1

**Christopher T. Zumalt**

First Name

Middle Name

Last Name

Case number (if known)

21. **Other.** Specify: \_\_\_\_\_

21. **+\$0.00** \_\_\_\_\_

22. **Your monthly expenses.** Add lines 4 through 21.

The result is your monthly expenses.

22. **\$3,975.00** \_\_\_\_\_

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. **\$2,059.61** \_\_\_\_\_

23b. Copy your monthly expenses from line 22 above.

23b. **-\$3,975.00** \_\_\_\_\_

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. **\$-1,915.39** \_\_\_\_\_

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

In re **Christopher T. Zumalt**, Case No. \_\_\_\_\_  
Debtor (if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 25 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **February 7, 2014**

Signature: /s/Christopher T. Zumalt  
**Christopher T. Zumalt** Debtor

Date \_\_\_\_\_

Signature: \_\_\_\_\_  
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.*

Address

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_\_\_  
[Print or type name of individual signing on behalf of debtor.]

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF MISSOURI

In re Christopher T. Zumalt  
Debtor

Case No. \_\_\_\_\_  
Chapter 7

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** – Debts secured by property of the estate. *(Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)*

|  |  |
|--|--|
| Property No. 1   |  |
| <b>Creditor's Name:</b><br>Harley Davidson Credit  | <b>Describe Property Securing Debt:</b><br>2013 Harley Davidson Road Glide |
| Property will be <i>(check one)</i> :<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |  |
| If retaining the property, I intend to <i>(check at least one)</i> :<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |  |
| Property is <i>(check one)</i> :<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt   |  |

|   |   |
|---|---|
| Property No. 2  |   |
| <b>Creditor's Name:</b><br>Green Tree Servicing LLC   | <b>Describe Property Securing Debt:</b><br>Property located at 608 NW Cliffside Court, Lee's Summit, MO |
| Property will be <i>(check one)</i> :<br><input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained  |   |
| If retaining the property, I intend to <i>(check at least one)</i> :<br><input type="checkbox"/> Redeem the property<br><input type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |   |
| Property is <i>(check one)</i> :<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt  |   |

|  |   |
|--|---|
| Property No. 3   |   |
| <b>Creditor's Name:</b><br>North American Savings Bank   | <b>Describe Property Securing Debt:</b><br>Residence locate at 273 NW 1401 Road, Holden, MO |
| Property will be <i>(check one)</i> :<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained<br><br>If retaining the property, I intend to <i>(check at least one)</i> :<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).<br><br>Property is <i>(check one)</i> :<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt |   |

|  |   |
|--|---|
| Property No. 4   |   |
| <b>Creditor's Name:</b><br>First Central Bank  | <b>Describe Property Securing Debt:</b><br>Residence locate at 273 NW 1401 Road, Holden, MO |
| Property will be <i>(check one)</i> :<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained<br><br>If retaining the property, I intend to <i>(check at least one)</i> :<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).<br><br>Property is <i>(check one)</i> :<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt |   |

|  |   |
|--|---|
| Property No. 5   |   |
| <b>Creditor's Name:</b><br>Wells Fargo Dealer Services   | <b>Describe Property Securing Debt:</b><br>2003 Dodge Ram 3500 Pickup |
| Property will be <i>(check one)</i> :<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained<br><br>If retaining the property, I intend to <i>(check at least one)</i> :<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).<br><br>Property is <i>(check one)</i> :<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt |   |

|  |   |
|--|---|
| Property No. 6   |   |
| <b>Creditor's Name:</b><br>GE Capital Retail Bank/Lowe's   | <b>Describe Property Securing Debt:</b><br>Refrigerator |
| Property will be <i>(check one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Surrendered</span> <span><input checked="" type="checkbox"/> Retained</span> </div>   |   |
| If retaining the property, I intend to <i>(check at least one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Redeem the property</span> <span><input checked="" type="checkbox"/> Reaffirm the debt</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Other. Explain _____</span> <span>(for example, avoid lien using 11 U.S.C. § 522(f)).</span> </div> |   |
| Property is <i>(check one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Claimed as exempt</span> <span><input checked="" type="checkbox"/> Not claimed as exempt</span> </div>   |   |

|   |  |
|---|--|
| Property No. 7  |  |
| <b>Creditor's Name:</b><br>Agco Finance   | <b>Describe Property Securing Debt:</b><br>Round Bailer, Mower Conditioner, Rake, Brush Hog, Prowler, Disc Mower |
| Property will be <i>(check one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input checked="" type="checkbox"/> Surrendered</span> <span><input type="checkbox"/> Retained</span> </div>  |  |
| If retaining the property, I intend to <i>(check at least one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Redeem the property</span> <span><input type="checkbox"/> Reaffirm the debt</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Other. Explain _____</span> <span>(for example, avoid lien using 11 U.S.C. § 522(f)).</span> </div> |  |
| Property is <i>(check one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Claimed as exempt</span> <span><input checked="" type="checkbox"/> Not claimed as exempt</span> </div>  |  |

|   |   |
|---|---|
| Property No. 8  |   |
| <b>Creditor's Name:</b><br>CNH Capital  | <b>Describe Property Securing Debt:</b><br>New Holland Round Bailer, New Holland Square Bailer, Pequea Tedder, Hay Trailer, New Holland Mower Conditioner |
| Property will be <i>(check one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input checked="" type="checkbox"/> Surrendered</span> <span><input type="checkbox"/> Retained</span> </div>  |   |
| If retaining the property, I intend to <i>(check at least one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Redeem the property</span> <span><input type="checkbox"/> Reaffirm the debt</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Other. Explain _____</span> <span>(for example, avoid lien using 11 U.S.C. § 522(f)).</span> </div> |   |
| Property is <i>(check one)</i> :<br><div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Claimed as exempt</span> <span><input checked="" type="checkbox"/> Not claimed as exempt</span> </div>  |   |

**PART B** – Personal property subject to unexpired leases. *(All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)*

|                               |                                  |  |
|-------------------------------|----------------------------------|--|
| Property No. 1                |                                  |  |
| <b>Lessor's Name:</b><br>None | <b>Describe Leased Property:</b> | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):<br><input type="checkbox"/> YES <input type="checkbox"/> NO |

**I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.**

Date: February 7, 2014

/s/Christopher T. Zumalt

Signature of Debtor

Signature of Joint Debtor

# UNITED STATES BANKRUPTCY COURT

## WESTERN DISTRICT OF MISSOURI

In re

**Christopher T. Zumalt**,  
*Debtor*

Case No. \_\_\_\_\_

Chapter **7** \_\_\_\_\_

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| Type of Liability   | Amount         |
|---|----------------|
| Domestic Support Obligations (from Schedule E)  | \$ <b>0.00</b> |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$ <b>0.00</b> |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ <b>0.00</b> |
| Student Loan Obligations (from Schedule F)  | \$ <b>0.00</b> |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$             |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$ <b>0.00</b> |
| <b>TOTAL</b>  | \$ <b>0.00</b> |

**State the following:**

|   |                    |
|---|--------------------|
| Average Income (from Schedule I, Line 12)   | \$ <b>2,059.61</b> |
| Average Expenses (from Schedule J, Line 22)   | \$ <b>3,975.00</b> |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 ) | \$ <b>4,286.95</b> |

**State the following:**

|  |                      |                     |
|--|----------------------|---------------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |                      | \$ <b>36,150.40</b> |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ <b>0.00</b>       |                     |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | \$ <b>0.00</b>       |                     |
| 4. Total from Schedule F   | \$ <b>177,931.26</b> |                     |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               | \$ <b>214,081.66</b> |                     |

In re **Christopher T. Zumalt**  
Debtor(s)

Case Number: \_\_\_\_\_  
(If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

- ☐ The presumption arises.  
☒ The presumption does not arise.  
☐ The presumption is temporarily inapplicable.

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

### Part I. MILITARY AND NON-CONSUMER DEBTORS

|           |   |
|-----------|---|
| <b>1A</b> | <p><b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for “The presumption does not arise” at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).</p>  |
| <b>1B</b> | <p><b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.</p>   |
| <b>1C</b> | <p><b>Reservists and National Guard Members; active duty or homeland defense activity.</b> Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the “exclusion period”). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for “The presumption is temporarily inapplicable” at the top of this statement, and (3) complete the verification in Part VIII. <b>During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.</b></p> <p><input type="checkbox"/> <b>Declaration of Reservists and National Guard Members.</b> By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard</p> <p style="margin-left: 40px;">a. <input type="checkbox"/> I was called to active duty after September 11, 2001, for a period of at least 90 days and</p> <p style="margin-left: 80px;"><input type="checkbox"/> I remain on active duty /or/</p> <p style="margin-left: 80px;"><input type="checkbox"/> I was released from active duty on _____, which is less than 540 days before this bankruptcy case was filed;</p> <p style="margin-left: 80px; text-align: center;">OR</p> <p style="margin-left: 40px;">b. <input type="checkbox"/> I am performing homeland defense activity for a period of at least 90 days /or/</p> <p style="margin-left: 80px;"><input type="checkbox"/> I performed homeland defense activity for a period of at least 90 days, terminating on _____, which is less than 540 days before this bankruptcy case was filed.</p> |

**Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION**

|   |  |                             |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
|---|--|-----------------------------|---|---|-----------------|--------------------|----------------|---|----------------|----|-------------------------------------|-----------------------------|--------------------|----|
| 2   | <b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed.<br>a. <input checked="" type="checkbox"/> Unmarried. <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b><br>b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b><br>c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b><br>d. <input type="checkbox"/> Married, filing jointly. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b> |                             |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. |  |                             | <b>Column A<br/>Debtor's<br/>Income</b> | <b>Column B<br/>Spouse's<br/>Income</b>   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| 3   | <b>Gross wages, salary, tips, bonuses, overtime, commissions.</b>  |                             |   | \$ <b>2,336.95</b>  | \$              |                    |                |   |                |    |                                     |                             |                    |    |
| 4   | <b>Income from the operation of a business, profession or farm.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as a deduction in Part V.</b> <table border="1" data-bbox="199 926 1157 1073"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$ <b>0.00</b></td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td>\$ <b>0.00</b></td> </tr> <tr> <td>c.</td> <td>Business income</td> <td>Subtract Line b from Line a</td> </tr> </table>   |                             |   | a.  | Gross receipts  | \$ <b>0.00</b>     | b.             | Ordinary and necessary business expenses  | \$ <b>0.00</b> | c. | Business income                     | Subtract Line b from Line a | \$ <b>0.00</b>     | \$ |
| a.  | Gross receipts   | \$ <b>0.00</b>              |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| b.  | Ordinary and necessary business expenses   | \$ <b>0.00</b>              |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| c.  | Business income  | Subtract Line b from Line a |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| 5   | <b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</b> <table border="1" data-bbox="199 1178 1157 1325"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$ <b>1,950.00</b></td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td>\$ <b>0.00</b></td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td>Subtract Line b from Line a</td> </tr> </table>   |                             |   | a.  | Gross receipts  | \$ <b>1,950.00</b> | b.             | Ordinary and necessary operating expenses | \$ <b>0.00</b> | c. | Rent and other real property income | Subtract Line b from Line a | \$ <b>1,950.00</b> | \$ |
| a.  | Gross receipts   | \$ <b>1,950.00</b>          |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| b.  | Ordinary and necessary operating expenses  | \$ <b>0.00</b>              |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| c.  | Rent and other real property income  | Subtract Line b from Line a |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |
| 6   | <b>Interest, dividends and royalties.</b>  |                             |   | \$ <b>0.00</b>  | \$              |                    |                |   |                |    |                                     |                             |                    |    |
| 7   | <b>Pension and retirement income.</b>  |                             |   | \$ <b>0.00</b>  | \$              |                    |                |   |                |    |                                     |                             |                    |    |
| 8   | <b>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.  |                             |   | \$ <b>0.00</b>  | \$              |                    |                |   |                |    |                                     |                             |                    |    |
| 9   | <b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: <table border="1" data-bbox="199 1734 1157 1797"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td>Debtor \$ _____</td> <td>Spouse \$ _____</td> </tr> </table>  |                             |   | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ _____ | Spouse \$ _____    | \$ <b>0.00</b> | \$  |                |    |                                     |                             |                    |    |
| Unemployment compensation claimed to be a benefit under the Social Security Act   | Debtor \$ _____  | Spouse \$ _____             |   |   |                 |                    |                |   |                |    |                                     |                             |                    |    |

|   |  |  |    |                     |
|---|--|--|----|---------------------|
| 10  | <b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. <b>Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance.</b> Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.          |  |    |                     |
|   | a.   |  | \$ | <b>0.00</b>         |
|   | b.   |  | \$ |                     |
|   | Total and enter on Line 10   |  | \$ | <b>0.00</b>         |
| 11  | <b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).   |  | \$ | <b>4,286.95</b>     |
| 12  | <b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.   |  | \$ | <b>4,286.95</b>     |
| <b>Part III. APPLICATION OF § 707(b)(7) EXCLUSION</b> |  |  |    |                     |
| 13  | <b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.  |  |    | \$ <b>51,443.40</b> |
| 14  | <b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)<br>a. Enter debtor's state of residence: <u>Missouri</u> b. Enter debtor's household size: <u>1</u>  |  |    | \$ <b>40,994.00</b> |
| 15  | <b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.<br><input type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.<br><input checked="" type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement. |  |    |                     |

**Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)**

|   |  |  |    |                    |
|---|--|--|----|--------------------|
| <b>Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)</b> |  |  |    |                    |
| 16  | <b>Enter the amount from Line 12.</b>  |  |    | \$ <b>4,286.95</b> |
| 17  | <b>Marital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. |  |    |                    |
|   | a.   |  | \$ |                    |
|   | b.   |  | \$ |                    |
|   | c.   |  | \$ |                    |
|   | Total and enter on Line 17.  |  |    | \$ <b>0.00</b>     |
| 18  | <b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.   |  |    | \$ <b>4,286.95</b> |

**Part V. CALCULATION OF DEDUCTIONS FROM INCOME****Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

| 19A  | <b>National Standards: food, clothing and other items.</b> Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.  | \$ <b>583.00</b>             |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
|--|---|------------------------------|----------------------------------|--|------------------|----------------------------------|--|--------------------|-----|-----------------------------|------------------------------|-----|----------------------|--------|-----|-------------------|---|-----|-------------------|---|-----|----------|-------|-----|----------|------|
| 19B  | <b>National Standards: health care.</b> Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. | \$ <b>60.00</b>              |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">Persons under 65 years of age</th> <th colspan="3" style="text-align: left;">Persons 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td style="width: 5%;">a1.</td> <td style="width: 65%;">Allowance per person</td> <td style="width: 30%; text-align: right;">60.00</td> <td style="width: 5%;">a2.</td> <td style="width: 65%;">Allowance per person</td> <td style="width: 30%; text-align: right;">144.00</td> </tr> <tr> <td>b1.</td> <td>Number of persons</td> <td style="text-align: right;">1</td> <td>b2.</td> <td>Number of persons</td> <td style="text-align: right;">0</td> </tr> <tr> <td>c1.</td> <td>Subtotal</td> <td style="text-align: right;">60.00</td> <td>c2.</td> <td>Subtotal</td> <td style="text-align: right;">0.00</td> </tr> </tbody> </table> |   |                              | Persons under 65 years of age    |  |                  | Persons 65 years of age or older |  |                    | a1. | Allowance per person        | 60.00                        | a2. | Allowance per person | 144.00 | b1. | Number of persons | 1 | b2. | Number of persons | 0 | c1. | Subtotal | 60.00 | c2. | Subtotal | 0.00 |
| Persons under 65 years of age  |   |                              | Persons 65 years of age or older |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| a1.  | Allowance per person  | 60.00                        | a2.                              | Allowance per person   | 144.00           |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| b1.  | Number of persons   | 1                            | b2.                              | Number of persons  | 0                |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| c1.  | Subtotal  | 60.00                        | c2.                              | Subtotal   | 0.00             |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| 20A  | <b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.  | \$ <b>435.00</b>             |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| 20B  | <b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b>  | \$ <b>0.00</b>               |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%;">a.</td> <td style="width: 65%;">IRS Housing and Utilities Standards; mortgage/rental expense</td> <td style="width: 30%; text-align: right;">\$ <b>744.00</b></td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td style="text-align: right;">\$ <b>2,153.00</b></td> </tr> <tr> <td>c.</td> <td>Net mortgage/rental expense</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </tbody> </table>   |   |                              | a.                               | IRS Housing and Utilities Standards; mortgage/rental expense | \$ <b>744.00</b> | b.                               | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | \$ <b>2,153.00</b> | c.  | Net mortgage/rental expense | Subtract Line b from Line a. |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| a.   | IRS Housing and Utilities Standards; mortgage/rental expense  | \$ <b>744.00</b>             |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| b.   | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42  | \$ <b>2,153.00</b>           |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| c.   | Net mortgage/rental expense   | Subtract Line b from Line a. |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |
| 21   | <b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:   | \$ <b>0.00</b>               |                                  |  |                  |                                  |  |                    |     |                             |                              |     |                      |        |     |                   |   |     |                   |   |     |          |       |     |          |      |

|     |  |                              |   |                  |    |  |                  |    |   |                              |                 |
|-----|--|------------------------------|---|------------------|----|--|------------------|----|---|------------------------------|-----------------|
| 22A | <p><b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.</p> <p><input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>   | \$ <b>212.00</b>             |   |                  |    |  |                  |    |   |                              |                 |
| 22B | <p><b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>  | \$ <b>0.00</b>               |   |                  |    |  |                  |    |   |                              |                 |
| 23  | <p><b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 60%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 35%; text-align: right;">\$ <b>517.00</b></td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td><td style="text-align: right;">\$ <b>430.00</b></td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td style="text-align: right;">Subtract Line b from Line a.</td></tr> </table> | a.                           | IRS Transportation Standards, Ownership Costs | \$ <b>517.00</b> | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 | \$ <b>430.00</b> | c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ <b>87.00</b> |
| a.  | IRS Transportation Standards, Ownership Costs  | \$ <b>517.00</b>             |   |                  |    |  |                  |    |   |                              |                 |
| b.  | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42   | \$ <b>430.00</b>             |   |                  |    |  |                  |    |   |                              |                 |
| c.  | Net ownership/lease expense for Vehicle 1  | Subtract Line b from Line a. |   |                  |    |  |                  |    |   |                              |                 |
| 24  | <p><b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 60%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 35%; text-align: right;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td><td style="text-align: right;">\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td style="text-align: right;">Subtract Line b from Line a.</td></tr> </table>   | a.                           | IRS Transportation Standards, Ownership Costs | \$               | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$               | c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | \$              |
| a.  | IRS Transportation Standards, Ownership Costs  | \$                           |   |                  |    |  |                  |    |   |                              |                 |
| b.  | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42   | \$                           |   |                  |    |  |                  |    |   |                              |                 |
| c.  | Net ownership/lease expense for Vehicle 2  | Subtract Line b from Line a. |   |                  |    |  |                  |    |   |                              |                 |
| 25  | <p><b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b></p>   | \$ <b>277.34</b>             |   |                  |    |  |                  |    |   |                              |                 |
| 26  | <p><b>Other Necessary Expenses: involuntary deductions for employment.</b> Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b></p>   | \$ <b>0.00</b>               |   |                  |    |  |                  |    |   |                              |                 |
| 27  | <p><b>Other Necessary Expenses: life insurance.</b> Enter total average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b></p>   | \$ <b>0.00</b>               |   |                  |    |  |                  |    |   |                              |                 |
| 28  | <p><b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due obligations included in Line 44.</b></p>  | \$ <b>0.00</b>               |   |                  |    |  |                  |    |   |                              |                 |

|    |  |             |
|----|--|-------------|
| 29 | <b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.   | \$ 0.00     |
| 30 | <b>Other Necessary Expenses: childcare.</b> Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. <b>Do not include other educational payments.</b>  | \$ 0.00     |
| 31 | <b>Other Necessary Expenses: health care.</b> Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. <b>Do not include payments for health insurance or health savings accounts listed in Line 34.</b>   | \$ 0.00     |
| 32 | <b>Other Necessary Expenses: telecommunication services.</b> Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. <b>Do not include any amount previously deducted.</b> | \$ 0.00     |
| 33 | <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.   | \$ 1,654.34 |

**Subpart B: Additional Living Expense Deductions**  
**Note: Do not include any expenses that you have listed in Lines 19-32**

|   |  |                        |           |
|---|--|------------------------|-----------|
| 34  | <b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  |                        |           |
|   | a.   | Health Insurance       | \$ 157.00 |
|   | b.   | Disability Insurance   | \$ 0.00   |
|   | c.   | Health Savings Account | \$ 0.00   |
|   | Total and enter on Line 34   |                        | \$ 157.00 |
| If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:<br>\$ _____ |  |                        |           |
| 35  | <b>Continued contributions to the care of household or family members.</b> Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.   | \$ 0.00                |           |
| 36  | <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  | \$ 0.00                |           |
| 37  | <b>Home energy costs.</b> Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. <b>You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.</b>  | \$ 0.00                |           |
| 38  | <b>Education expenses for dependent children less than 18.</b> Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b> | \$ 0.00                |           |

\*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

|    |   |           |
|----|---|-----------|
| 39 | <b>Additional food and clothing expense.</b> Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must demonstrate that the additional amount claimed is reasonable and necessary.</b> | \$ 0.00   |
| 40 | <b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).   | \$ 0.00   |
| 41 | <b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40   | \$ 157.00 |

### Subpart C: Deductions for Debt Payment

| 42 | <p><b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.</p> <table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>Average Monthly Payment</th> <th>Does payment include taxes or insurance?</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>See Attachment 1</td> <td>2013 Harley Davidson Road Glide</td> <td>\$ 333.33</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td>b.</td> <td>See Attachment 2</td> <td>See Attachment 2</td> <td>\$ 0.00</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td>c.</td> <td>See Attachment 3</td> <td>See Attachment 3</td> <td>\$ 1,518.00</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td></td> <td colspan="2">See Attachment 4: Future Payments</td> <td>Total: Add Lines a, b and c.</td> <td></td> </tr> </tbody> </table> |                                 |                              |   |         | Name of Creditor | Property Securing the Debt | Average Monthly Payment   | Does payment include taxes or insurance? | a.               | See Attachment 1                | 2013 Harley Davidson Road Glide | \$ 333.33 | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | b.               | See Attachment 2 | See Attachment 2 | \$ 0.00          | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | c.      | See Attachment 3 | See Attachment 3                       | \$ 1,518.00 | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no |         | See Attachment 4: Future Payments |  | Total: Add Lines a, b and c. |  | \$ 2,555.87 |
|----|---|---------------------------------|------------------------------|---|---------|------------------|----------------------------|---------------------------|--|------------------|---------------------------------|---------------------------------|-----------|---|------------------|------------------|------------------|------------------|---|---------|------------------|--|-------------|---|---------|-----------------------------------|--|------------------------------|--|-------------|
|    | Name of Creditor  | Property Securing the Debt      | Average Monthly Payment      | Does payment include taxes or insurance?                            |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| a. | See Attachment 1  | 2013 Harley Davidson Road Glide | \$ 333.33                    | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| b. | See Attachment 2  | See Attachment 2                | \$ 0.00                      | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| c. | See Attachment 3  | See Attachment 3                | \$ 1,518.00                  | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
|    | See Attachment 4: Future Payments   |                                 | Total: Add Lines a, b and c. |   |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| 43 | <p><b>Other payments on secured claims.</b> If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.</p> <table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>See Attachment 5</td> <td>2013 Harley Davidson Road Glide</td> <td>\$ 0.00</td> </tr> <tr> <td>b.</td> <td>See Attachment 6</td> <td>See Attachment 6</td> <td>\$ 0.00</td> </tr> <tr> <td>c.</td> <td>See Attachment 7</td> <td>See Attachment 7</td> <td>\$ 0.00</td> </tr> <tr> <td></td> <td colspan="2">See Attachment 8: Other Secured Claims</td> <td>Total: Add Lines a, b and c</td> </tr> </tbody> </table>   |                                 |                              |   |         | Name of Creditor | Property Securing the Debt | 1/60th of the Cure Amount | a.                                       | See Attachment 5 | 2013 Harley Davidson Road Glide | \$ 0.00                         | b.        | See Attachment 6  | See Attachment 6 | \$ 0.00          | c.               | See Attachment 7 | See Attachment 7  | \$ 0.00 |                  | See Attachment 8: Other Secured Claims |             | Total: Add Lines a, b and c   | \$ 0.00 |                                   |  |                              |  |             |
|    | Name of Creditor  | Property Securing the Debt      | 1/60th of the Cure Amount    |   |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| a. | See Attachment 5  | 2013 Harley Davidson Road Glide | \$ 0.00                      |   |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| b. | See Attachment 6  | See Attachment 6                | \$ 0.00                      |   |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| c. | See Attachment 7  | See Attachment 7                | \$ 0.00                      |   |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
|    | See Attachment 8: Other Secured Claims  |                                 | Total: Add Lines a, b and c  |   |         |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |
| 44 | <p><b>Payments on prepetition priority claims.</b> Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. <b>Do not include current obligations, such as those set out in Line 28.</b></p>   |                                 |                              |   | \$ 0.00 |                  |                            |                           |  |                  |                                 |                                 |           |   |                  |                  |                  |                  |   |         |                  |  |             |   |         |                                   |  |                              |  |             |

|  |    |  |                               |                    |
|--|----|--|-------------------------------|--------------------|
| 45   |    | <b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.   |                               |                    |
|  | a. | Projected average monthly chapter 13 plan payment.   | \$                            |                    |
|  | b. | Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)   | x                             |                    |
|  | c. | Average monthly administrative expense of chapter 13 case  | Total: Multiply Lines a and b | \$                 |
| 46   |    | <b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.  |                               | \$ <b>2,555.87</b> |
| <b>Subpart D: Total Deductions from Income</b>           |    |  |                               |                    |
| 47   |    | <b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.   |                               | \$ <b>4,367.21</b> |
| <b>Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION</b> |    |  |                               |                    |
| 48   |    | <b>Enter the amount from Line 18 (Current monthly income for § 707(b)(2))</b>  |                               | \$ <b>4,286.95</b> |
| 49   |    | <b>Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))</b>   |                               | \$ <b>4,367.21</b> |
| 50   |    | <b>Monthly disposable income under § 707(b)(2).</b> Subtract Line 49 from Line 48 and enter the result   |                               | \$ <b>-80.26</b>   |
| 51   |    | <b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.   |                               | \$ <b>0.00</b>     |
| 52   |    | <b>Initial presumption determination.</b> Check the applicable box and proceed as directed.<br><input checked="" type="checkbox"/> <b>The amount on Line 51 is less than \$7,475*.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.<br><input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$12,475*.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.<br><input type="checkbox"/> <b>The amount on Line 51 is at least \$7,475*, but not more than \$12,475*.</b> Complete the remainder of Part VI (Lines 53 through 55). |                               |                    |
| 53   |    | <b>Enter the amount of your total non-priority unsecured debt</b>  |                               | \$ <b>0.00</b>     |
| 54   |    | <b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.  |                               | \$ <b>0.00</b>     |
| 55   |    | <b>Secondary presumption determination.</b> Check the applicable box and proceed as directed.<br><input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.<br><input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.   |                               |                    |
| <b>Part VII: ADDITIONAL EXPENSE CLAIMS</b>               |    |  |                               |                    |
| 56   |    | <b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.  |                               |                    |
|  |    | Expense Description  | Monthly Amount                |                    |
|  | a. |  | \$                            |                    |
|  | b. |  | \$                            |                    |
|  | c. |  | \$                            |                    |
|  |    | Total: Add Lines a, b and c  | \$                            |                    |

\*Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**Part VIII: VERIFICATION**

57

I declare under penalty of perjury that the information provided in this statement is true and correct. *(If this is a joint case, both debtors must sign.)*

Date: **February 7, 2014**Signature: **/s/Christopher T. Zumalt**  
*(Debtor)*

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
*(Joint Debtor, if any)*

## **Attachment 1/2**

### **Attachment 1**

**Harley Davidson Credit**

### **Attachment 2**

**Green Tree Servicing LLC**

**Property located at 608 NW Cliffside Court, Lee's Summit, MO**

### **Attachment 3**

**North American Savings Bank**

**Residence locate at 273 NW 1401 Road, Holden, MO**

### **Attachment 4: Future Payments**

**Name of Creditor: First Central Bank**

**Property Securing the Debt: Residence locate at 273 NW 1401 Road, Holden, MO**

**Average Monthly Payment: \$635.00**

**Does payment include taxes or insurance?: No**

**Name of Creditor: Wells Fargo Dealer Services**

**Property Securing the Debt: 2003 Dodge Ram 3500 Pickup**

**Average Monthly Payment: \$38.33**

**Does payment include taxes or insurance?: No**

**Name of Creditor: GE Capital Retail Bank/Lowe's**

**Property Securing the Debt: Refrigerator**

**Average Monthly Payment: \$31.21**

**Does payment include taxes or insurance?: No**

**Name of Creditor: Agco Finance**

**Property Securing the Debt: Round Bailer, Mower Conditioner, Rake, Brush Hog, Prowler, Disc Mower**

**Average Monthly Payment: \$0.00**

**Does payment include taxes or insurance?: No**

**Name of Creditor: CNH Capital**

**Property Securing the Debt: New Holland Round Bailer, New Holland Square Bailer, Pequea Tedder, Hay Trailer, New Holland Mower Conditioner**

**Average Monthly Payment: \$0.00**

**Does payment include taxes or insurance?: No**

### **Attachment 5**

**Harley Davidson Credit**

### **Attachment 6**

**Green Tree Servicing LLC**

## **Attachment 2/2**

**Property located at 608 NW Cliffside Court, Lee's Summit, MO**

### **Attachment 7**

**North American Savings Bank**

**Residence locate at 273 NW 1401 Road, Holden, MO**

### **Attachment 8: Other Secured Claims**

**Name of Creditor: First Central Bank**

**Property Securing the Debt: Residence locate at 273 NW 1401 Road, Holden, MO**

**Average Monthly Payment: \$0.00**

**Name of Creditor: Wells Fargo Dealer Services**

**Property Securing the Debt: 2003 Dodge Ram 3500 Pickup**

**Average Monthly Payment: \$0.00**

**Name of Creditor: GE Capital Retail Bank/Lowe's**

**Property Securing the Debt: Refrigerator**

**Average Monthly Payment: \$0.00**

**Name of Creditor: Agco Finance**

**Property Securing the Debt: Round Bailer, Mower Conditioner, Rake, Brush Hog, Prowler, Disc Mower**

**Average Monthly Payment: \$0.00**

**Name of Creditor: CNH Capital**

**Property Securing the Debt: New Holland Round Bailer, New Holland Square Bailer, Pequea Tedder, Hay Trailer, New Holland Mower Conditioner**

**Average Monthly Payment: \$0.00**